

Exhibit 8

SUPERIOR COURT OF WASHINGTON FOR GRAYS HARBOR COUNTY

ALISHA BRIGGS,

Plaintiff,

vs.

SEA-MAR COMMUNITY HEALTH  
CENTERS; and PENNY M. FAIRES, M.D. and  
JOHN DOE FAIRES, wife and husband,

Defendants.

No. 13-2-00819-6

PLAINTIFF'S FIRST  
INTERROGATORIES AND REQUESTS  
FOR PRODUCTION TO DEFENDANT  
PENNY FAIRES, M.D.

TO: PENNY FAIRES, M.D., Defendant;

AND TO: Thomas H. Fain and Rebecca L. Penn of Fain Anderson VanDerhoef, PLLC,  
her attorneys.

In accordance with CR 33, Rules for Superior Court, please answer the following interrogatories separately and fully, under oath, within thirty (30) days of the date of service of these interrogatories upon you. These interrogatories are continuing and you are requested to provide any information that alters or augments the answers now given.

**Note: These interrogatories and requests for production are in Word format and are available electronically on request by e-mailing [jodyh@stritmatter.com](mailto:jodyh@stritmatter.com).**

**REQUESTS FOR PRODUCTION**

In accordance with CR 34, Rules for Superior Court, plaintiff further requests that defendant produce the documents designated herein at the offices of Stritmatter Kessler Whelan

PLAINTIFF'S FIRST INTERROGATORIES AND REQUESTS  
FOR PRODUCTION TO DEFENDANT PENNY FAIRES, M.D.- 1

1 **ANSWER:** I presume that the medical records will address statements made by Alisha  
2 Briggs concerning her condition at various times, as indicated in the medical records. As of  
3 this time, I do not have any medical records to review. Postoperatively, I recall that Ms.  
4 Briggs told me that her surgeon had said that her case was very unusual, and it was very  
5 unusual for such a young patient to have cauda equina syndrome. I also recall my  
6 discussions with Ms. Briggs, wherein she denied having any weakness, or bowel or bladder  
7 problems.

8 **INTERROGATORY NO. 12:** In 2012, were you a partner, shareholder, member or  
9 employee of any entity that was in the business of providing medical services? If so, please state  
10 the name of the entity and your relationship to it.

11 **ANSWER:** No.

12 **INTERROGATORY NO. 13:** Please describe the nature of your business/professional  
13 relationship, if any, with Sea Mar Community Health Centers in 2012.

14 **ANSWER:** Locum tenens.

15 **REQUEST FOR PRODUCTION NO 4:** Please produce copies of any contracts or  
16 agreements between you and Sea Mar Community Health Centers in 2012, or other written  
17 documents describing the relationship between you and Sea Mar Community Health Centers in  
18 2012.

19 **RESPONSE:** See attached contract with Sea Mar.

20 **INTERROGATORY NO. 14:** If you no longer have a business/professional relationship  
21 with Sea Mar Community Health Centers, please state the reason(s) why you are no longer affiliated  
22 with Sea Mar Community Health Centers.

23 **ANSWER:** My locum tenens period was completed.

24  
PLAINTIFF'S FIRST INTERROGATORIES AND REQUESTS  
FOR PRODUCTION TO DEFENDANT PENNY FAIRES, M.D.- 11

CERTIFICATION

The undersigned attorney for Defendant Penny Faires, MD has read the foregoing answers and responses to Plaintiff's First Interrogatories and Requests for Production Directed to Penny Faires, MD, and certifies they are in compliance with CR 26(g).

Dated: 1/13/14

Signed: Thomas H. Fair

DECLARATION

PENNY FAIRES, MD, declares under penalty of perjury under the laws of the State of Washington: I am one of the Defendants in the above-entitled action; I have read the foregoing answers and responses to Plaintiff's First Interrogatories and Requests for Production Directed to Penny Faires, MD, know the contents thereof, and believe the same to be true.

Signed at: Seattle, WA  
(City, State)

Date: 1/11/14

Penny Faires  
PENNY FAIRES, MD

PLAINTIFF'S FIRST INTERROGATORIES AND REQUESTS  
FOR PRODUCTION TO DEFENDANT PENNY FAIRES, M.D.- 21

**Exhibit 9**

/12/2014 4:11:26PM

## Appointment Detail Report

### SeaMar Community Health Centers

Appt Date & Time	Sched Loc	Sched Dept	Resource	Appt Type Comments	Duration	Encounter No.	Status
<b>Source: Falres, Penny</b>							
Patient: 2/25/12 9:00 am	OSMD	H: OSMD	Ext: Home FAIRPENN	DOB:	15		Acknowledged
Patient: 2/25/12 9:15 am	OSMD	H: OSMD	Ext: home FAIRPENN	DOB:	15		Acknowledged
Patient: 2/25/12 9:30 am	OSMD	H: OSMD	DOB: FAIRPENN		15		Acknowledged
Patient: 2/25/12 9:45 am	OSMD	H: OSMD	Ext: Cell W: FAIRPENN	Ext: DOB: 15			Acknowledged
Patient: 2/25/12 10:00 am	OSMD	H: OSMD	Ext: Home FAIRPENN	DOB:	15		Acknowledged
Patient: 2/25/12 10:15 am	OSMD	H: OSMD	Ext: Home FAIRPENN	DOB:	15		Acknowledged
Patient: 2/25/12 11:00 am	OSMD	H: OSMD	Ext: Home W: FAIRPENN	Ext: Cell DOB: 15			Acknowledged
Patient: 2/25/12 11:15 am	OSMD	H: OSMD	Ext: Cell W: FAIRPENN	DOB:	15		Acknowledged
Patient: 2/25/12 11:30 am	OSMD	H: OSMD	Ext: Home FAIRPENN	DOB:	15		Acknowledged
Patient: 2/25/12 1:00 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 2/25/12 1:15 pm	OSMD	H: OSMD	Ext: home FAIRPENN	DOB:	15		Acknowledged
Patient: 793180 Alisha 2/25/12 1:30 pm	Briggs OSMD	H: 360 591-6097 OSMD	Ext: Cell W: 360 591-6098 FAIRPENN	Ext: Cell DOB: 08/21/1989 zzzNP NP muscle spasms/CHPW HO	15	5912350	Acknowledged
Patient: 2/25/12 1:45 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 2/25/12 2:00 pm	OSMD	H: OSMD	Ext: Home DOB: FAIRPENN		15		Acknowledged
Patient: 2/25/12 2:15 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 2/25/12 2:30 pm	OSMD	H: OSMD	Ext: Home DOB: FAIRPENN		15		Acknowledged
Patient: 2/25/12 2:45 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 2/25/12 3:00 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged

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2/12/2014 4:11:26PM

## Appointment Detail Report

### SeaMar Community Health Centers

ppt Date & Time	Sched Loc	Sched Dept	Resource	Appt Type Comments	Duration	Encounter No.	Status
<b>Resource: Faires, Penny</b>							
atient: /25/12 3:15 pm	OSMD	H: OSMD	DOB: FAIRPENN		15		Acknowledged
atient: /25/12 3:30 pm	OSMD	H: OSMD	Ext: cell W: FAIRPENN	Ext: home	15		Acknowledged
atient: /25/12 3:45 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
atient: /25/12 4:00 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
atient: /25/12 4:15 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
atient: /25/12 4:30 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged

2/12/2014 4:12:36PM

## Appointment Detail Report

### SeaMar Community Health Centers

ppt Date & Time	Sched Loc	Sched Dept	Resource	Appt Type Comments	Duration	Encounter No.	Status
<b>Resource: Faires, Penny</b>							
Patient: 5/7/12 9:00 am	OSMD	H: OSMD	Ext: Home W: FAIRPENN	DOB:	15		Acknowledged
Patient: 5/7/12 9:15 am	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/7/12 9:30 am	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/7/12 9:45 am	OSMD	H: OSMD	Ext: Work W: FAIRPENN	Ext: Home DOB: 15			Acknowledged
Patient: 5/7/12 10:00 am	OSMD	H: OSMD	Ext: Home DOB: FAIRPENN		15		Acknowledged
Patient: 5/7/12 10:15 am	OSMD	H: OSMD	Ext: Cell W: FAIRPENN	DOB:	15		Acknowledged
Patient: 5/7/12 10:30 am	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/7/12 10:45 am	OSMD	H: OSMD	Ext: Cell W: FAIRPENN	DOB:	15		Acknowledged
Patient: 5/7/12 11:00 am	OSMD	H: OSMD	DOB: FAIRPENN		15		Acknowledged
Patient: 5/7/12 11:15 am	OSMD	H: OSMD	Ext: Home DOB: FAIRPENN		15		Acknowledged
Patient: 5/7/12 11:30 am	OSMD	H: OSMD	Ext: home DOB: FAIRPENN		15		Acknowledged
Patient: 5/7/12 1:00 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/7/12 1:15 pm	OSMD	H: OSMD	Ext: Home W: FAIRPENN	Ext: Cell DOB: 15			Acknowledged
Patient: 793180 Alisha Briggs 5/7/12 1:30 pm	OSMD	H: 360 591-6097 OSMD	Ext: Cell W: 360 591-6098 FAIRPENN	Ext: Cell DOB: 08/21/1989 MFOLLOWUP pt is still having muscle spasms and previous problems	15	6179620	Acknowledged
Patient: 5/7/12 1:45 pm	OSMD	H: OSMD	Ext: cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/7/12 2:00 pm	OSMD	H: OSMD	Ext: Cell W: FAIRPENN	Ext: msg DOB: 15			Acknowledged
Patient: 5/7/12 2:30 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/7/12 2:45 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged



2/12/2014 4:12:36PM

## Appointment Detail Report

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ppt Date & Time	Sched Loc	Sched Dept	Resource	Appt Type Comments	Duration	Encounter No.	Status
<b>Resource: Faires, Penny</b>							
atient: /7/12 3:00 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
atient: /7/12 3:30 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
atient: /7/12 4:00 pm	OSMD	H: OSMD	Ext: Home DOB: FAIRPENN		15		Acknowledged
atient: /7/12 4:30 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged

2/12/2014 4:14:58PM

## Appointment Detail Report

### SeaMar Community Health Centers

ppt Date & Time	Sched Loc	Sched Dept	Resource	Appt Type Comments	Duration	Encounter No.	Status
<b>Resource: Faires, Penny</b>							
Patient: 5/15/12 10:30 am	OSMD	H: OSMD	Ext: Cell W: FAIRPENN	Ext: MSG	DOB: 15		Acknowledged
Patient: 5/15/12 11:00 am	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 11:15 am	OSMD	H: OSMD	Ext: Home DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 11:30 am	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 11:45 am	OSMD	H: OSMD	Ext: home DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 12:00 pm	OSMD	H: OSMD	Ext: home W: FAIRPENN	DOB: 15			Acknowledged
Patient: 5/15/12 12:45 pm	OSMD	H: OSMD	Ext: Cell W: FAIRPENN	Ext: Home DOB: 15			Acknowledged
Patient: 5/15/12 1:00 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 1:15 pm	OSMD	H: OSMD	Ext: Home DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 1:30 pm	OSMD	H: OSMD	Ext: Home DOB: FAIRPENN		15		Acknowledged
Patient: 793180 Allisha 5/15/12 3:00 pm	Briggs OSMD	H: 360 591-6097 OSMD	Ext: Cell W: 360 591-6098 FAIRPENN	Ext: Cell MFOLLOWUP FU Sclatica	DOB: 08/21/1989 15	6545160	Acknowledged
Patient: 5/15/12 3:15 pm	OSMD	H: OSMD	Ext: cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 3:30 pm	OSMD	H: OSMD	DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 3:45 pm	OSMD	H: OSMD	DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 4:15 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 4:30 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 4:30 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 4:45 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged

2/12/2014 4:14:58PM

## Appointment Detail Report

### SeaMar Community Health Centers

Page: 2

ppt Date & Time	Sched Loc	Sched Dept	Resource	Appt Type Comments	Duration	Encounter No.	Status
<b>Resource: Falres, Penny</b>							
Patient: 5/15/12 5:00 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 5:15 pm	OSMD	H: OSMD	Ext: Home DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 5:30 pm	OSMD	H: OSMD	Ext: Home DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 5:45 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 6:00 pm	OSMD	H: OSMD	Ext: Cell DOB: FAIRPENN		15		Acknowledged
Patient: 5/15/12 6:15 pm	OSMD	H: OSMD	Ext: Cell W: FAIRPENN	Ext: Home DOB: 15	15		Acknowledged
Patient: 5/15/12 6:30 pm	OSMD	H: OSMD	Ext: Home DOB: FAIRPENN		15		Acknowledged